Commerce, Production, Supply and Distribution) Bill, 2003 was introduced in the Rajya Sabha on 7th March, 2001 and passed by the House on 9th April, 2003. It envisages to discourage the use of tobacco and tobacco products by banning advertisement of tobacco products, prohibition of smoking in public places and ban on sale of tobacco products to minors in addition to other control measures. The Bill will now be taken up for consideration in the Lok Sabha. The provisions of the said Bill are proposed to be made applicable to the whole of India.

Training to doctors to bring down maternal mortality rate

3146. PROF. M. SANKARALINGAM : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government have started a pilot project to train doctors to bring down maternal mortality rate;

(b) if so, the details thereof;

(c) whether this project has been made operational in Tamil Nadu in particular and other States in general;

(d) if so, the details thereof and if not, the reasons therefor; and

(e) the steps taken to stop deaths of women during pregnancy in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Government of India have initiated a pilot training programme to train MBBS doctors in Life Saving Anaesthetic skills for Emergency Obstetric Care. This has been done to provide skilled doctors for taking care of life threatening obstetric emergency cases at First Referral Unit level, in order to bring down maternal mortality rate. In addition, another pilot project to train doctors on Manual Vacuum Aspiration (MVA) for safe abortions is being implemented in 16 district of 8 states, i.e. West Bengal, Tamil Nadu, Andhra Pradesh, Orissa, Rajasthan, Madhya Pradesh, Uttaranchal and Uttar pradesh.

(c) and (d) This training programme in Life Saving Anaesthetic Skills will be extended to the States, including Tamil Nadu after the experiences that are gained from this pilot project and these will be suitably incorporated in the curriculum of the training programmes that will be taken up thereafter. The pilot on manual Vaccum Aspiration (MVA) is already being implemented in Salem and Dindigul districts of Tamil Nadu.

(e) Under the RCH Programme a number of interventions are being implemented in all States of the country for bringing down deaths of women

during pregnancy and childbirth. For the mothers the interventions include Essential Obstetric Care; Emergency Obstetric Care; provisions of Referral Transport through Panchayat and Provision of drugs and equipment at First Referral Units.

In order to improve delivery of these services in districts, which are remote and have no demographic indicators, contractual staff in the form of additional ANMs, Staff Nurses and Laboratory Technicians is being funded under this programme. Funds are also being provided for schemes like 24 hours delivery services at selected primary heaith centres and community health centres, hiring of doctors for in addition another pilot project for providing essential Obstetric Care and MTP services at PHCs and hiring of anesthetists for assisting emergency operations on women with maternal complications.

In order to improve safe delivery practices a Dai training programme is being undertaken in 156 districts in 18 States and is now being extended to all districts in EAG States. For making services available at PHCs in remote areas a scheme for holding Reproductive and Child Health Camps is also being implemented in 176 weak districts in 27 States.

Private Hospitals for Speciality Treatment for CGHS beneficiaries in A.P.

3147. SHRIN.RDASARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the private hospitals approved by Government for the purpose of availing speciality treatment for the CGHS beneficiaries and the hospitals which are under the consideration of Government for giving approval at Hyderabad and Secunderabad in Andhra Pradesh;

(b) whether the reimbursement of medical charges is made directly to the hospital or to the patient;

(c) whether there is any parameters for the hospital charges for various kinds of treatment, medicines and other services to be charged from the CGHS beneficiaries at these approved hospitals; and

(d) if so, the details thereof?

THE MINISTEROF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) The list of private hospitals/diagnostic centres recognised under CGHS, Hyderabad (including Secunderabad) alongwith